

TREE INSPECTION REPORT
CITY OF ASHEVILLE PUBLIC WORKS DEPARTMENT

Concerned Party: _____
Address: Street # _____ Zip: _____
Telephone: Home: _____ Work: _____

Date: _____ Inspector(s): _____

Tree Location: _____
Tree Species: _____
Size (DBH) _____

Special Value: ☐ Specimen ☐ Historic ☐ Street Tree ☐ Unusual
☐ Shade ☐ Screen ☐ Other

Tree Health:

Foliage: ☐ Normal ☐ Chlorotic ☐ Necrotic
Callus Development ☐ Excellent ☐ Average ☐ Poor ☐ None
Vigor Class ☐ Excellent ☐ Average ☐ Fair ☐ Poor

Major Pests / Diseases:

Site Conditions:

Site Character: ☐ Residence ☐ Commercial ☐ Industrial ☐ Park
☐ Natural

Soil Problems: ☐ Drainage ☐ Shallow ☐ Compacted

Construction Damage:

Target:

Use Under Tree: ☐ Building ☐ Parking ☐ Traffic ☐ Pedestrian
☐ Recreation ☐ Landscape / Lawn

Can Target Be Moved? ☐ Yes ☐ No

Occupancy: ☐ Occasional Use ☐ Medium Use ☐ Frequent Use

Tree Recommendations:

Prune: ☐ Yes ☐ No
Cable / Brace: ☐ Yes ☐ No
Remove Tree: ☐ Yes ☐ No
Replace ☐ Yes ☐ No

Comments: _____
